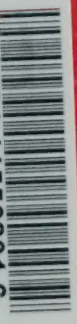


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The National Clearinghouse on Family Violence

Elder Abuse

What is Elder Abuse?

There is no universal agreement on what constitutes elder abuse; however, the term is generally used to mean "the physical, psychosocial or financial mistreatment of a senior." Seniors may be vulnerable because of frailty, poor health, and financial and emotional dependency. Neglect is commonly associated with abuse.

Physical abuse involves assault, rough handling, sexual abuse, or the withholding of physical necessities such as food, personal care, hygienic care, or medical care.¹

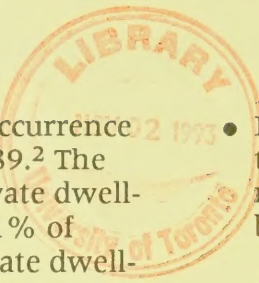
Psychosocial abuse involves verbal assault, social isolation, lack of affection, or denying seniors the chance to participate in decisions with respect to their own lives.

Financial abuse involves the misuse of money or property. This can include fraud or using the funds of elders for purposes contrary to their needs and interests.

Neglect can lead to any of these three types of abuse, and can be either active or passive. In passive neglect, the caregiver does not intend to injure the dependent elder; neglect is active when the caregiver consciously fails to meet the needs of the elder.

How Widespread is the Problem?

As the problem of elder abuse has only recently come to public attention, there are few statistics on the incidence and prevalence of elder abuse. Even available figures are likely understated, as victims of abuse are reluctant to identify themselves.



A national Canadian study on the occurrence of elder abuse was conducted in 1989.² The survey contacted 2000 elders in private dwellings to obtain information on the 91% of Canadian seniors who reside in private dwellings. The findings indicate the following:

- Approximately 4% of elders in Canadian private dwellings (approximately 98 000 people) reported being abused.
- Financial abuse is the most prevalent type of abuse, affecting 60 000 Canadian elders. It is more likely to be perpetrated by a distant relative or a non-relative than by a close family member. Only 7% of financial abusers are financially dependent on their elderly victims.
- Chronic verbal aggression, a component of psychosocial abuse, affects approximately 34 000 elderly Canadians.
- More than 18 000 elderly persons in Canada are subjected to more than one type of abuse.
- Approximately 12 000 seniors in Canada experience physical abuse. Victims of physical abuse are more likely than non-victims to be married. In the majority of cases, the abusers are spouses of the victim.
- Female victims of abuse outnumber male victims by approximately 5:3; however, this is roughly the same as the ratio of elderly women to men in the general population.

Facts to Consider

The Victim

- The age, gender, marital status, ethnicity, and income level of victims of elder abuse do not differ significantly from those of elders who are not victims.³

- Elders often do not take any action against their abusers. They may be ashamed, embarrassed, and unwilling to risk being rejected by loved ones.⁴
- Victims often rationalize abuse, blaming themselves in the belief that they once hurt the abuser.
- Victims abused by their sons or daughters occasionally feel inadequate and embarrassed, and blame themselves for poor child rearing.⁵
- Victims are usually reluctant to admit abuse is taking place and often refuse an offer of assistance. Elders would often rather endure the present situation than risk being sent to an institution.

The Abuser

- Those entrusted to care for an elder do not always have the necessary resources (knowledge, space, family support, family assistance, time, finances, temperament, or desire).⁶
- Abuse may be a consequence of the caregiver's personal problems, such as unemployment, drug or alcohol abuse, or failing personal relationships.
- Abuse may result when caregivers feel resentment toward an elder because of the loss of independence that comes with the responsibility of having to care for someone.⁷
- When questioned about the care being provided to the elder, it is natural for an abuser to show irritation or resentment by being evasive or refusing to answer at all.

Detecting Abuse

The following *may* indicate abuse; if you notice any of these symptoms or conditions, contact one of the support services listed below.

Physical Abuse Indicators

- frequent unexplained injuries (bruises, broken limbs, welts, cuts, and grip marks), accompanied by a habit of seeking medical assistance from a variety of locations
- reluctance to seek medical treatment for injuries or denial of their existence
- disorientation or grogginess (may indicate the misuse of medication)
- fear and edginess in the presence of a caregiver or family member

Psychosocial Abuse Indicators

- exclusion of an older person from discussions on major decisions
- absence of emotional warmth toward the elder
- social isolation – whether physically or emotionally imposed
- verbal assault (shouting, infantilization, degrading remarks)

Material Abuse Indicators

- cashing of pension cheques without proper authorization from the elder
- bills and expenses continuously unpaid
- standard of living not appropriate for an elder's income level
- sudden sale of property belonging to a senior person

- sudden revision of the elder's will, naming a new beneficiary
- disproportionately high contribution by the elder to household expenses
- granting of power of attorney under suspicious conditions

Indicators of Neglect

- malnutrition in an older person who cannot get food without help
- decline in personal hygiene
- disregard of elder in family affairs
- lack of needed medication or aids
- lack of material needs of life

Where to go for Support Services

- Police department
- Distress centre
- Hospital
- Mental health centre
- Social service agency
- Senior citizen home or day care centre
- Advocacy centre
- Public health department

What can be done to Prevent Elder Abuse?

The following list combines suggestions for individuals, groups and governments addressing the problem of elder abuse. Many of the areas are controversial and require more evaluation.

- Hold discussions between elders and potential caregivers focusing on the expectations of the elder for future arrangements.⁸
- Seriously consider plans to resettle elders into a private dwelling and consult all affected individuals. This would help to lessen negative feelings and preclude abuse.⁹
- Incorporate education on the aging process and elder abuse into the curricula of educational facilities.¹⁰
- Establish support groups to educate and counsel caregivers on emotional strains that can result from the responsibility of caring for a dependent adult.
- Establish groups and services (day care facilities, financial aid and homemaker services) to assist caregivers with daily responsibilities.¹¹ This would reduce the strain experienced by caregivers and increase the number of people in contact with elders, thereby increasing opportunities for identifying abuse.
- Establish counselling services and self-help groups to assist elders with problems and promote seniors' independence.
- Set up safe houses to provide abused elders with temporary respite.
- Set up advocacy programs in which an agent looks after legal and other interests on behalf of the elderly person. The agent can have obligations to parallel those of a trustee.¹²
- Ensure that available information, programs, and services are well publicized.
- Develop standard identification and intervention protocols to deal with suspected cases of elder abuse.¹³

- Establish registries for documenting suspected cases of elder abuse. This would show whether an individual has previously been suspected of abuse.
- Investigate the merit of legislation making it mandatory to report to the authorities any reasonable suspicion that an elder is being abused.

Suggested Reading

- *A Review of the Social and Legal Issues Concerning Elder Abuse*. Joseph P. Hornick, Lynn McDonald, Gerald B. Robertson, and Jean E. Wallace. Calgary: Canadian Research Institute for Law and the Family, 1988.
- *Conflict in the Family*. K. Pillemer and R. Wolf, eds. Dover, Massachusetts: Auburn House, 1986.
- *Duty Bound: Elder Abuse and Family Care*. Suzanne K. Steinmetz. Newbury Park, California: Sage Productions, 1988.
- *Elder Abuse and Neglect*. Alberta Senior Citizens Secretariat. Edmonton: Alberta Senior Citizens Secretariat, 1988.
- *Elder Abuse and Neglect*. Mary Joe Quinn and Susan K. Tomita. New York: Springer Publishing Company, 1986.
- *Enhancing Awareness of Elder Abuse: Three Education Models*. Ottawa: Council on Aging of Ottawa-Carleton, 1988.
- *Protection of the Elderly: A Study of Elder Abuse*. Donna J. Shell. Winnipeg: [Department of National Health and Welfare], 1982.
- *Violence et personnes âgées*. Bélanger et al. Montréal: Les Cahiers de l'association québécoise de gérontologie, 1981.

Audiovisual: The Family Prevention Division of Health and Welfare Canada has compiled films and videos on elder abuse which can be borrowed free of charge through the regional offices of the National Film Board.

Endnotes

1. Donna J. Shell, *Protection of the Elderly: A Study of Elder Abuse* (Winnipeg: Department of National Health and Welfare, 1982), p. 24.
2. Elizabeth Podnieks et al., *National Survey on Abuse of the Elderly in Canada* (Toronto: Ryerson Polytechnical Institute, 1990). Copies available from National Clearinghouse on Family Violence.
3. Joseph P. Hornick et al., *A Review of the Social and Legal Issues Concerning Elder Abuse* (Calgary: Canadian Research Institute for Law and the Family, 1988), p. vii.
4. Wendy Johnson-Brown, *Abuse of Elderly Women* (Winnipeg: Senior Women Against Abuse Collective, 1989), p. 22.
5. Suzanne K. Steinmetz, "Elder Abuse," *Aging*, Feb. 1981, p. 7.
6. Nancy Gnaedinger, *Elder Abuse: A Discussion Paper* (Ottawa: National Clearinghouse on Family Violence, 1989), p. 18.
7. Elizabeth Podnieks, "Elder Abuse: It's Time We Did Something About It," *The Canadian Nurse*, Vol. 81, #11, December 1985. Offprints available from National Clearinghouse on Family Violence.
8. Gnaedinger, *ibid.*
9. *Ibid.*
10. Podnieks, *National Survey*, p. 83.
11. Shell, p. 19.
12. Mary Ellen Welsh, *Report on Focus on Elder Abuse Workshop* (Regina: University of Regina, 1989), p. 23.
13. Council on Aging of Ottawa-Carleton, *Enhancing Awareness of Elder Abuse: Three Education Models*, March 1988.

This document was prepared by Natalie I. Migus. The contribution of the following individuals is gratefully acknowledged: Jeanette Bartlett, Seniors Secretariat, Health and Welfare Canada; Dick Carr, Saskatchewan Seniors Directorate; Catherine Luke, Ontario Office for Senior Citizens; John Angus Mackenzie, Nova Scotia Senior Citizens Secretariat; Judy Murakami, Ministry of Health; Elizabeth Podnieks, Ryerson Polytechnical Institute of Toronto; Dr. Vincent Sacco, Queen's University; Diets Habets, Gordon E. Phaneuf, Sue Tracey and Meena Trotman, Family Violence Prevention Division, Health and Welfare Canada.

For further information on elder abuse or other family violence issues, contact:

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Social Service Programs Branch
Health and Welfare Canada
Ottawa, Ontario
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or call toll free number, 1-800-267-1291

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